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> D BRUCE FEB 10 2017

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Creen Life Holding, LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Samaulla Stevins, Esq.
Firm/Company
2681 Airport Rd. S, Suite C-104
Naples FL 34112 FS = T
STEVINS (awf) vn @ annual copy notification) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
Samuello Stevins at (239) 300-44/7 25 S
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$55.00 Filing Fee & Certificate of Status \$\Bigcup \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GREEN LIFE HOLDINGS, LLC	
(Name of the Limited Liability Company as it n (A Florida Limited Liability C	ow appears on our records.)
(111 total Dilling C	ompany)
The Articles of Organization for this Limited Liability Company were file	ed on 01/09/17 and assigned
Florida document number L17000007165	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability com	pany here:
The new name must be distinguishable and contain the words "Limited Liability Compa	ny," the designation "LLC" or the abbreviation "L.L.C."
Enter non-ninging local effects of the second solutions of	
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
- · · · · · · · · · · · · · · · · · · ·	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office add	ress on our records, enter the name of the new
registered agent and/or the new registered office address here:	=
	20
Name of New Registered Agent:	AST 7
	4 Y C E E E
New Registered Office Address:	(0.55)
•	
	Florida 2
City .	R A Code
New Registered Agent's Signature, if changing Registered Agent:	9 Og

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

or removed	from our records:	Address Type of Action Pappalaudo 25 Comanche Par Add
MGR = M $AMBR = A$	Ianager authorized Member	
<u>Title</u>	<u>Name</u>	Address Type of Action
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		Hawley, PA 18428 * Remove
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e record specifies a delayed The 90th day after the reco	effective date ord is filed.	, but not an ef	fective time, a	ıt 12:01 a.m.	on the	earlier
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	Signature of a mem	ber or authorized re	Heurs	muci		

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Filing Fee: \$25.00